

Professional competencies of the newly qualified dental practitioner

Guidance note:

Domestic and family violence

July 2023

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Introduction

Australian Dental Council (ADC) guidance notes aim to provide helpful information for education providers in specific areas where our standards have recently changed.

This includes the following standards:

- ADC Professional competencies of the newly qualified dental practitioner (the Competencies), effective from 1 July 2023.
- ADC Accreditation standards for dental practitioner programs (the Standards), which became effective from 2021.

Guidance notes are not definitive or binding documents, nor are they intended to be prescriptive.

What is domestic and family violence?

Domestic and family violence is a national issue and is widespread across all age groups, genders, socio-economic groups and cultures.

The Victorian Government's Royal Commission into Family Violence (2016) stated the following definition for domestic and family violence:

Domestic and family violence is described by the Family Violence Protection Act 2008 (Vic)¹ as

' ... family violence is –

- a) Behaviour by a person towards a family member of that person if that behaviour –
 - I. Is physically or sexually abusive; or
 - II. Is emotionally or psychologically abusive; or
 - III. Is economically abusive; or
 - IV. Is threatening; or
 - V. Is coercive; or
 - VI. In any other way controls or dominates the family member and causes that family member to feel fear for the safety or well being of that family member or another person;
- b) Behaviour by a person that causes a child to hear or witness, or otherwise be exposed to the effects of, behaviour referred to in paragraph (a).'

Dental practitioners play a vital role as first responders in being able to recognise and assist patients who present with trauma that could be related to family violence.²

Relevant professional competencies

The revised Competencies include specific reference to 'people who have experienced violence and abuse including sexual abuse' in the broader definition of 'Groups or populations at increased risk of harm or poor oral health', which states that 'all Professional competencies must take into account people, groups and populations at greater risk of harm and/or poor oral health outcomes, that face greater challenges in accessing oral health care, as existing systems, policies and process may not meet their needs'.

The Competencies now include the following:

Domain 1. Social responsibility and professionalism

Newly qualified dental practitioners must be able to:

- comply with Commonwealth State and Territory legislation and regulatory requirements relevant to the dental practitioner and the provision of dental care.

Domain 2. Communication and leadership

Newly qualified dental practitioners must be able to:

- engage in interprofessional collaborative practice to provide person-centred care
- recognise, assess, and respond to domestic and family violence risk, prioritise safety, provide information, and refer as required
- identify opportunities for improvement in care delivery and advocate for improved oral health outcomes, including for groups or populations at increased risk of harm or poor oral health

Domain 6. Person-centred care

Newly qualified dental practitioners must be able to:

- recognise health as it relates to the individual, taking into consideration medical, social and cultural contexts
- determine when and how to refer to the appropriate health and or care professional.

Why is it important for dental practitioners to recognise and care for people experiencing domestic and family violence?

Dental practitioners can play an important role in responding to family violence, as evidence shows that 76 per cent of women who experience domestic and family violence would cancel other medical appointments but keep their dental appointments.²

Women may disclose the experiences of domestic abuse if asked and, although there may be barriers to disclosing this information to the dentist, the dental practice is an avenue that can be used for appropriately signposting patients to relevant services.³

Dental practitioners must be able to identify that people in their care may be experiencing inappropriate and/or violent behaviour from another person. This requires knowledge of the indicators (physical, emotional and/or behavioural signs and symptoms) associated with domestic and family violence. It is also important that practitioners have a system in place that includes referral pathways and are aware of state and territory laws with respect to reporting requirements.⁴

Guidance for education providers

To become and remain accredited with the ADC, programs are required to demonstrate that their 'design, delivery and resourcing enable students to achieve the required Professional competencies' (Accreditation standards; Domain 3). This includes demonstrating that program learning outcomes address and assess all the required Competencies (Accreditation standards; 3.2; 5.2).

To meet the ADC's standards in this area, education providers should consider how students can be best prepared throughout the curriculum to provide safe care to individuals at risk from domestic and family violence. The experiences students have, how they are delivered and how the relevant Competencies are assessed are likely to vary between programs depending on several factors including the profession and program – for example, whether it is a pre-registration or specialist program.

We do not prescribe exactly how a program should provide opportunities for students to best prepare students to provide care to people who may be at risk from domestic and family violence. However, some approaches might include, for example:

- course content that addresses steps in the treatment process after a disclosure of family violence such as non-judgmental listening, initial safety assessment, referrals, continuing care and note-taking for legal purposes⁵
- inclusion of mandatory reporting sessions within ethics and professionalism course content
- modules addressing communication skills and preparing dental practitioners to have challenging conversations
- reflective practice on at-risk populations identified through clinical placements
- role-play or critical thinking questions covering common signs of domestic violence
- small-group discussions on the topic to promote student engagement (including students' own lived experiences as appropriate)
- if possible, engagement with local domestic violence community groups and services to promote awareness and reinforce knowledge of referral pathways.

Education providers are encouraged to consider how they can prepare students for working with people at risk of domestic and family violence, to ensure they are aware of mandatory reporting requirements and can provide safe and appropriate treatment for populations at risk.

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